

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		4 C	1/31/01
O.I.P.E. CLASSIFIER	TM	JCBTU	5/16/01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral).... Canceled
 ÷ Restricted

N Not Selected
 I Interference
 A Appeal
 O Objected

BEST AVAILABLE COPY

Claim	Date
Final	
Original	
1	12/29
2	✓ 1/29
3	✓
4	✓ ✓
5	✓ ✓
6	0 0
7	0 0
8	0 0
9	✓ ✓
10	1/1
11	1/1
12	
13	
14	
15	✓ ✓
16	0 0
17	0 0
18	0 0
19	✓ ✓
20	1/1
21	1/1
22	✓ ✓
23	0 0
24	✓ ✓
25	1/1
26	✓ ✓
27	0
28	0
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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